

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         | SP       |        | 8-21-01  |
| O.I.P.E. CLASSIFIER       |          | 1008   | 6/24/01  |
| FORMALITY REVIEW          | SO       |        | 07/16/01 |
| RESPONSE FORMALITY REVIEW |          |        |          |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim          | Date   |
|----------------|--------|
| Final Original |        |
| 1              | 8/2/02 |
| 2              | ✓      |
| 3              | ✓      |
| 4              | ✓      |
| 5              | ✓      |
| 6              | ✓      |
| 7              | ✓      |
| 8              | ✓      |
| 9              | ✓      |
| 10             | ✓      |
| 11             | ✓      |
| 12             | ✓      |
| 13             | ✓      |
| 14             | ✓      |
| 15             | ✓      |
| 16             | ✓      |
| 17             | ✓      |
| 18             | ✓      |
| 19             | ✓      |
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| 39             | ✓      |
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| 42             | ✓      |
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| 46             | ✓      |
| 47             | ✓      |
| 48             | ✓      |
| 49             | ✓      |
| 50             | ✓      |

| Claim          | Date |
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| Final Original |      |
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| Claim          | Date |
|----------------|------|
| Final Original |      |
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| 150            |      |

If more than 150 claims or 10 actions  
staple additional sheet here

(LEFT INSIDE)

10/6/1088

10/16/01